

## First Trimester Prenatal Care Utilization Clark County and Washington State, 1992 through 2001

## Why we should care:

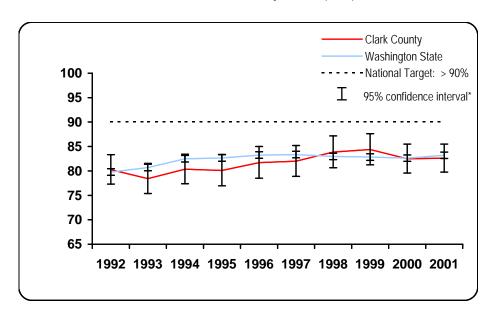
Prenatal care (PNC) throughout pregnancy increases opportunities for improving the long-term health of mothers and their infants, thereby promoting a healthier society and lower financial burden to families and taxpayers. (1)

## Status:

- In 2001, 83% of pregnant women in Clark County and in Washington State obtained first trimester prenatal care. (2,3)
- Both Clark County and Washington State fell short of the national target that 90% of all pregnant women have ongoing prenatal care commencing in the first trimester of their pregnancy (4).

## What we can do:

- Support programs that remove financial obstacles to women's access to early prenatal care. (1)
- Support culturally appropriate prenatal care services. (1)
- Support efforts to ensure an adequate supply and geographic distribution of diverse providers who are able to provide initial appointments within two weeks of request.(1)
- Promote and support women's participation in Family Planning clinics, the Special Supplemental Nutrition Program for Women, Infants, and Children (WIC), and Maternity Support Services (MSS). Participation in these programs increases the likelihood of receiving timely and adequate prenatal care. (5,6,7)



	Clark County			W	Washington State		
	% with 1st			% with 1st			
Year	Tri. PNC	95% CI*	Number	Tri. PNC	95% CI*	Number	
1992	80.3	(77.5, 83.1)	3,202	79.8	(79.2, 80.4)	60,478	
1993	78.4	(75.5, 81.2)	3,225	80.7	(80.1, 81.3)	60,594	
1994	80.4	(77.7, 83.1)	3,475	82.5	(81.8, 83.2)	60,423	
1995	80.1	(77.5, 82.7)	3,647	82.7	(82.0, 83.3)	59,058	
1996	81.7	(79.2, 84.3)	3,859	83.3	(82.6, 83.9)	59,867	
1997	82.0	(79.5, 84.6)	4,046	83.4	(82.7, 84.0)	59,140	
1998	83.9	(81.4, 86.4)	4,277	83.0	(82.3, 83.6)	59,655	
1999	84.4	(81.9, 86.9)	4,349	82.8	(82.2, 83.5)	59,628	
2000	82.5	(80.1, 85.0)	4,451	82.6	(82.0, 83.3)	61,700	
2001	82.6	(80.2, 85.1)	4,390	83.2	(82.5, 83.9)	60,771	

<sup>\*</sup>If the confidence intervals for state and county overlap in a given year, there is no significant difference between these rates See back side for sources



Sources: (1) Washington State Department of Health. *The Health of Washington State. Prenatal Care.* Olympia, WA, 2002, Aug [cited 2002, Nov] 418p. (2) *Vital Registration System, Annual Statistics Files, Births 1980-2001.* [Data file]. Olympia, WA: Washington State Department of Health, Center for Health Statistics. (3) Public Health: Seattle & King County, Epidemiology, Planning, & Evaluation. (1991-2003). *VistaPHw 2.3.2*, 2002 [Computer software for public health assessment]. Seattle, WA. (4) National Target: US Dept of Health and Human Services, Healthy People 2010, Objective 16-6: Increase to 90% the proportion of pregnant women receiving early (beginning in the first trimester) and adequate prenatal care. (5) Jamieson D., & Bhescher P. (1992, September/October). The effect of family planning participation on prenatal care use and low birth weight. *Family Planning Perspectives*, 24 (5), 214-218. (6) Rush D. et al. (1988). Historical study of pregnancy outcomes. *American Journal of Clinical Nutrition*, 48, 412-28. (7) Farow D., Baldwin L., Cawthon M.L., & Connell F. (1996). The impact of extended maternity services on prenatal care use among Medicaid women. *American Journal of Preventive Medicine*, 12 (2), 103-107.